

FIGURE 7 - FIGURE 6

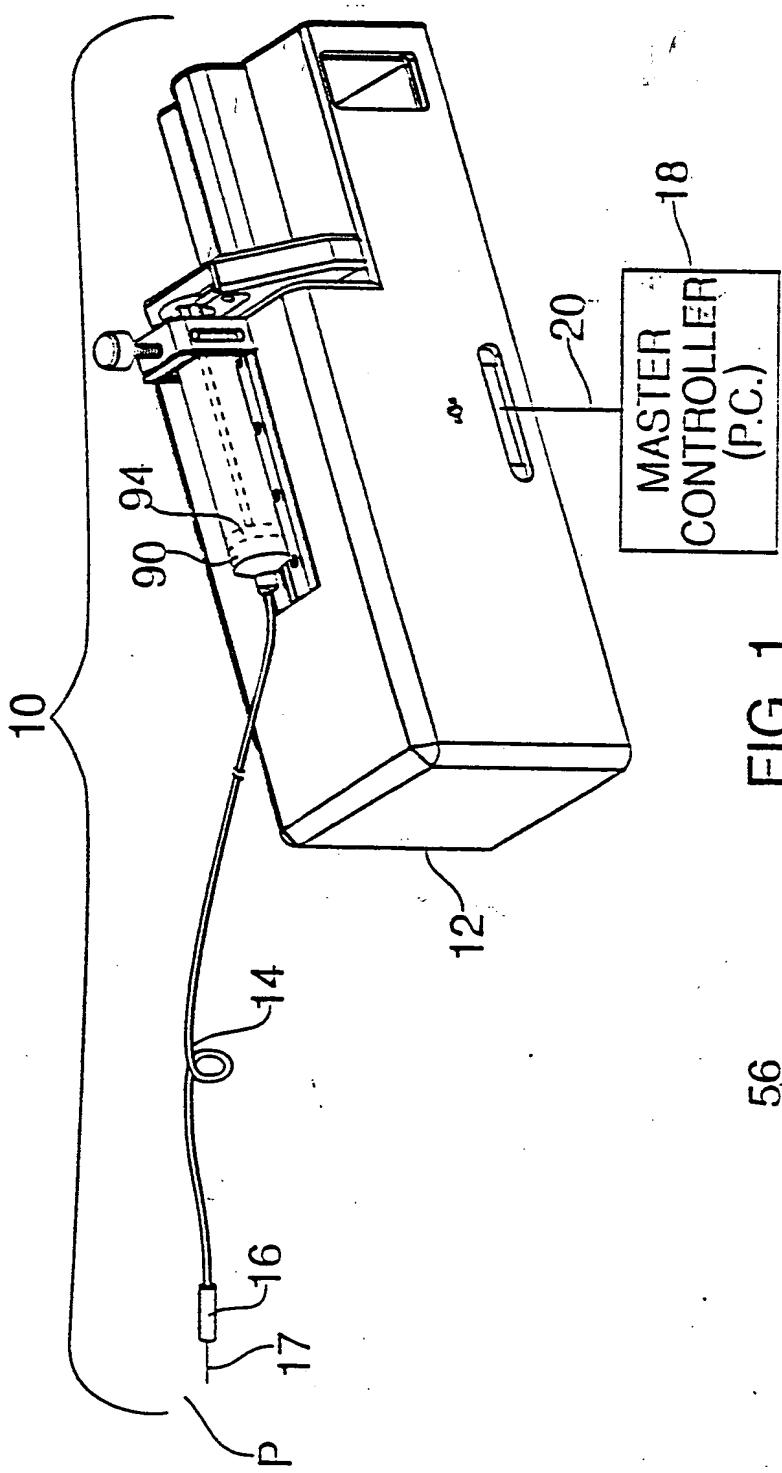


FIG. 1

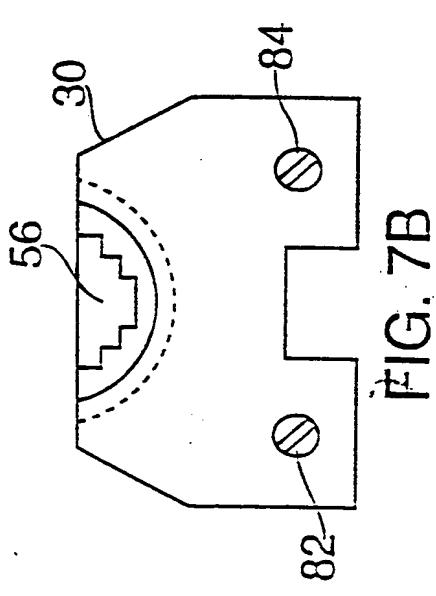


FIG. 7A
60

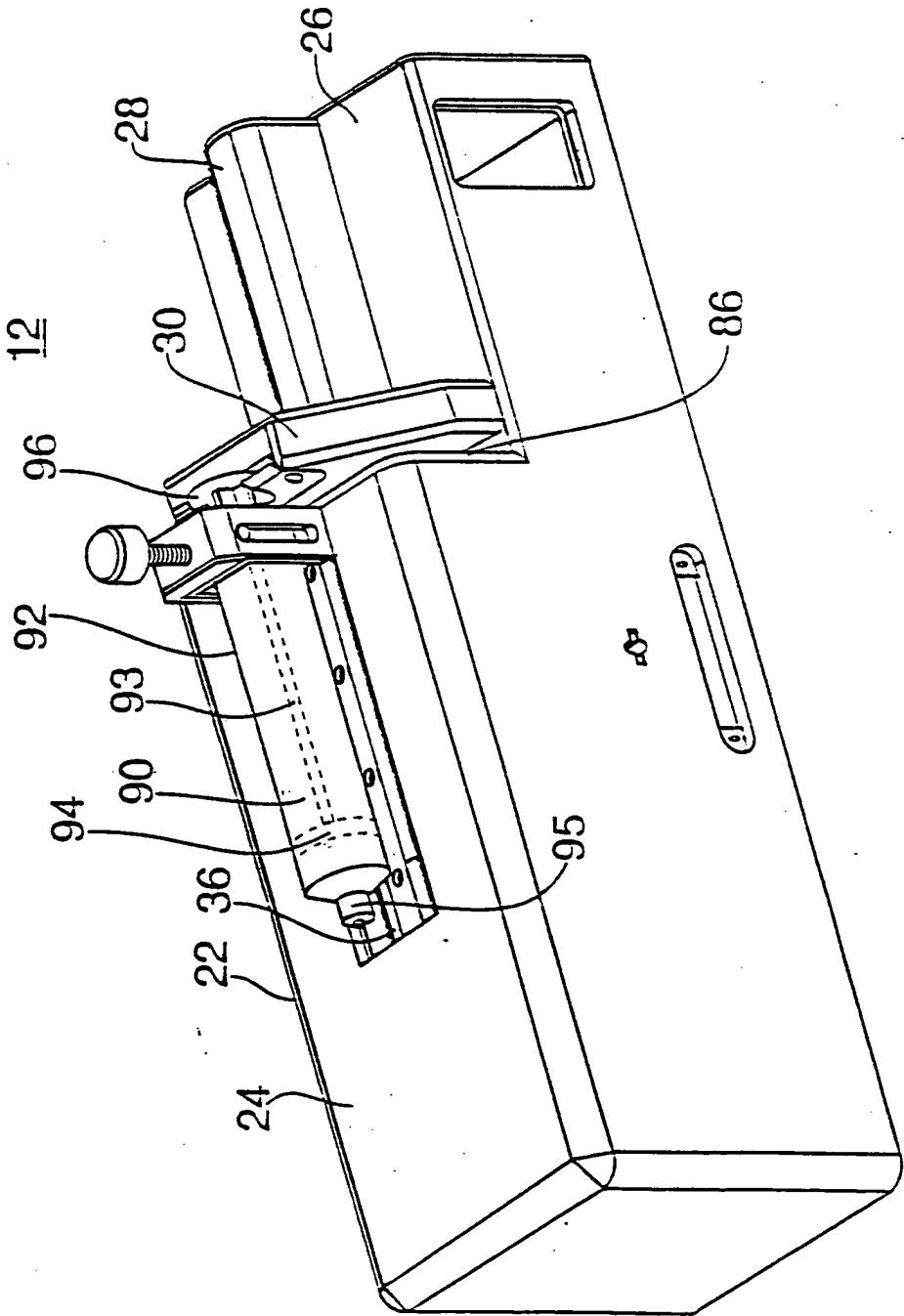


FIG. 2

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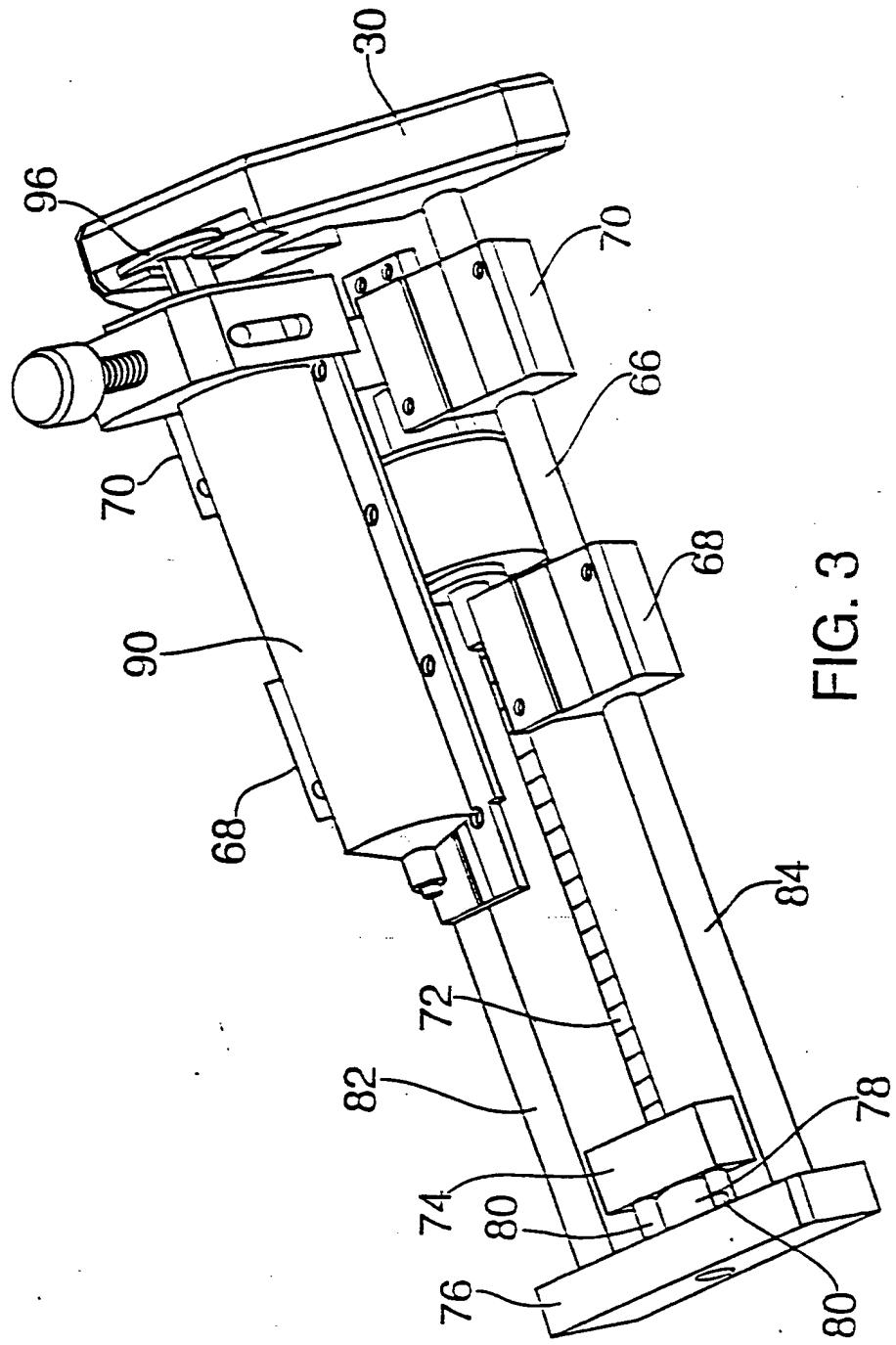


FIG. 3

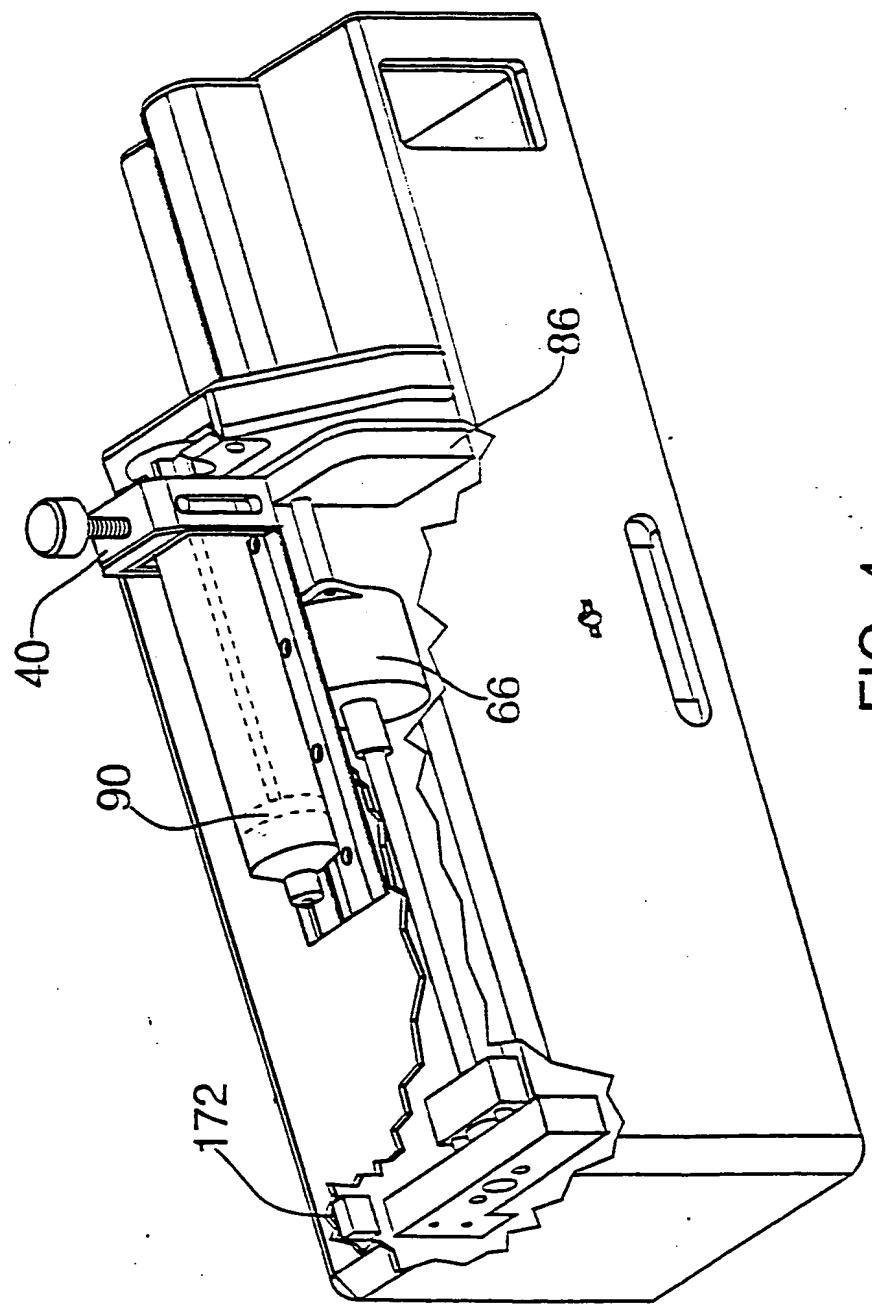


FIG. 4

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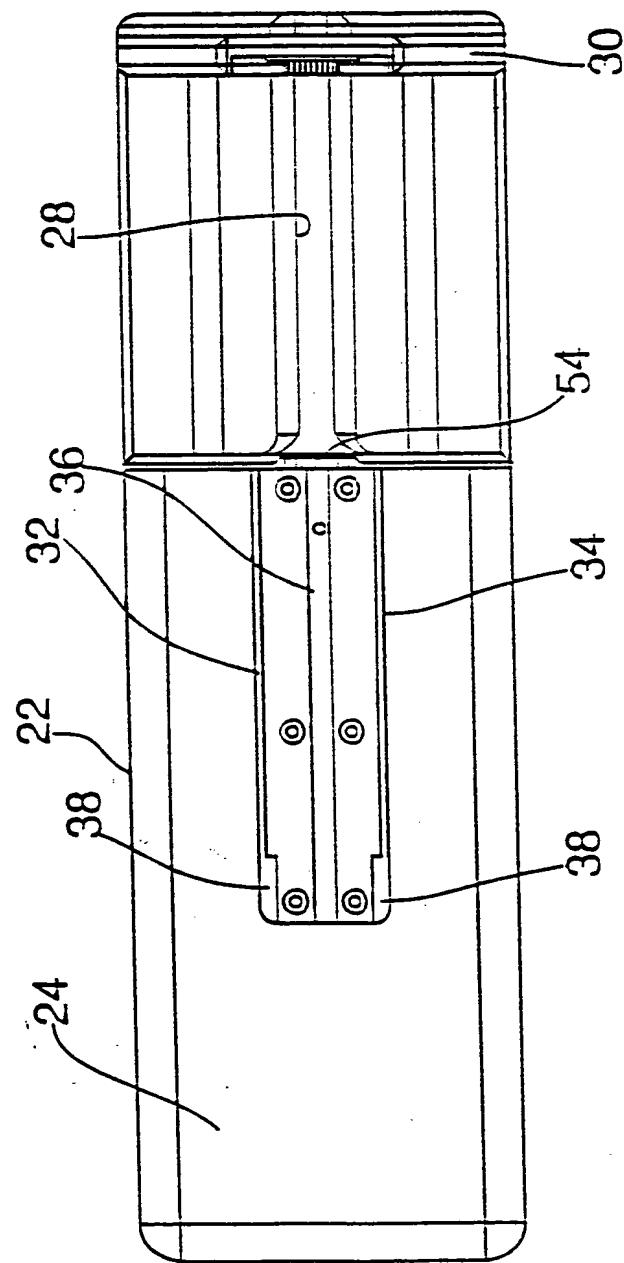


FIG. 5A

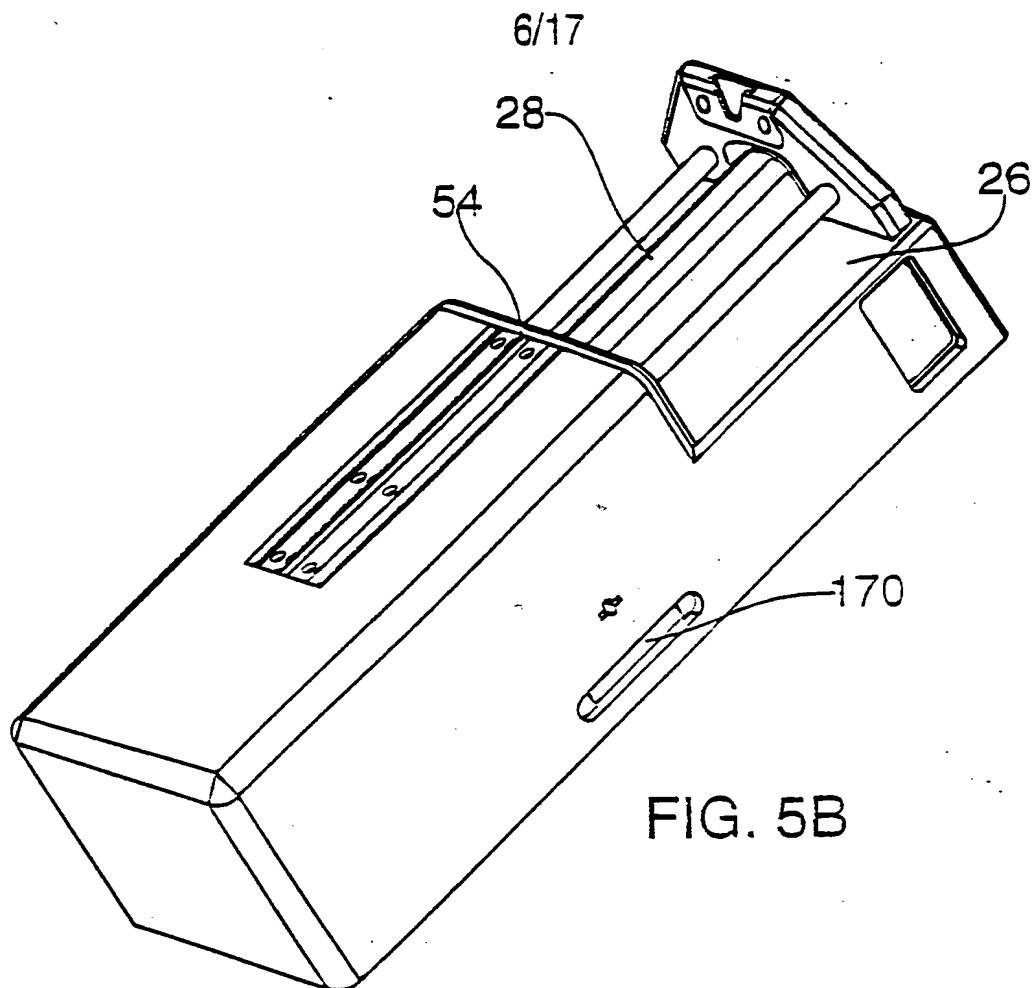
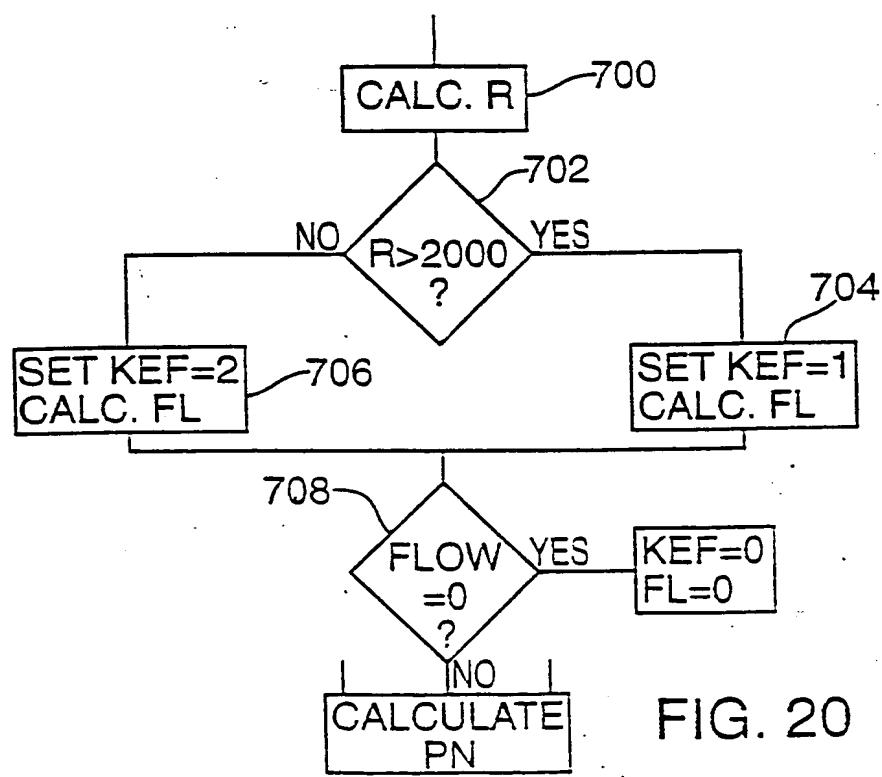


FIG. 5B



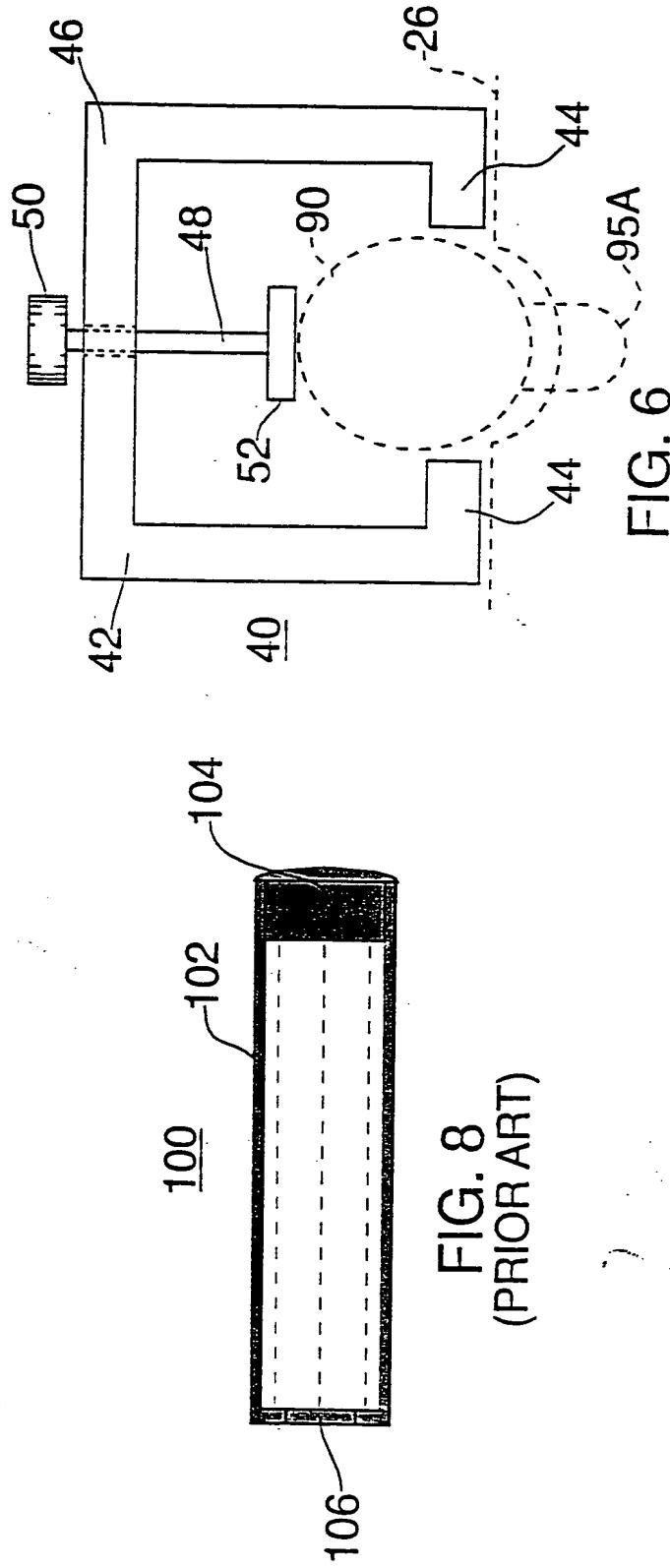
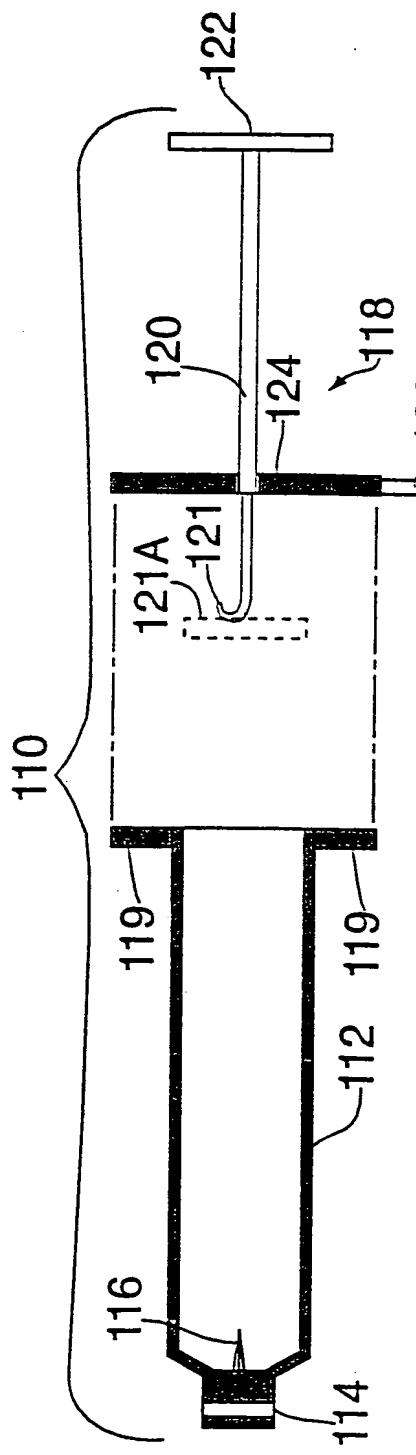
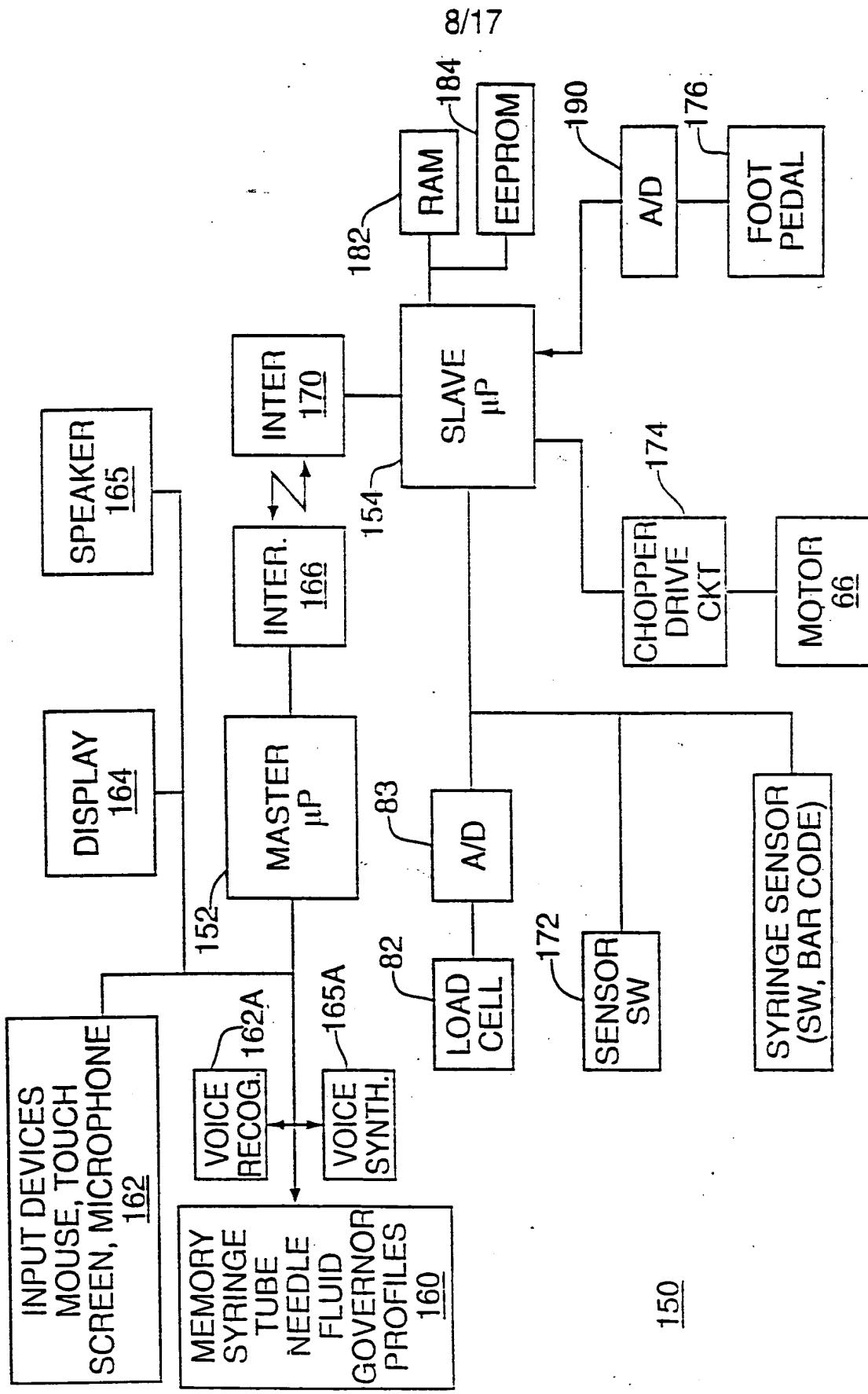


FIG. 10



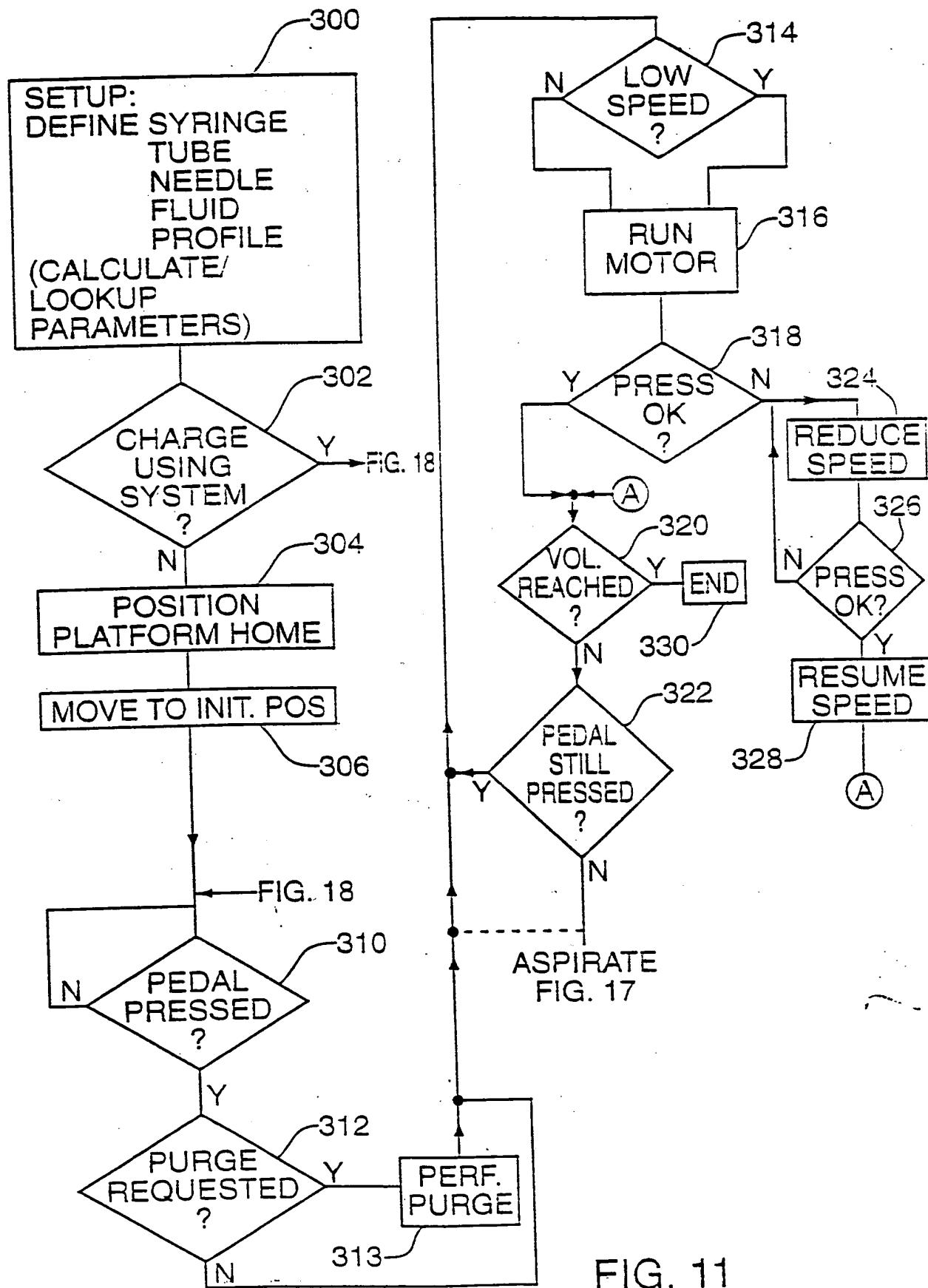


FIG. 11

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Milestone Database Setup

Syringe				
Type	Stroke Length	Syringe Force	Nominal Volume (CC)	Fall Point
1102CC	1.91	0.51	1.81	1
103CC	2.1	0.33	3	2.53
105CC	1.75	1	5	2.81
110CC	2.41	1.31	10	2.71
120CC	2.76	1.81	20	1.65

Needle			
Type	Gage	Diameter	Length
1BD-305128	30	0.0061	1
1BD-305136	27	0.02	1.25
1DB-33333			
1DD-1234			
Asosad	23	23	23

Fluid		
Type	Viscosity	Specific Weight
X1ccdy	000001	0.6602
1Body Fluid	1	2
1Asosad	1	2

Tube		
Type	Diameter	Length
1Concore	0.673	0.999
1Tube#1	0.015	54
1Tube#2	0.015	55

Machine Constants												
Force	Travel	Max Force	Zero Adjust	Tare/Recx	Scale Factor	Tare	Peak Zero	Low End	Low Start	High End	High Start	High Aspirate
1	0.5	4.5	40	2	0.75	27	0	1	1	1	1	

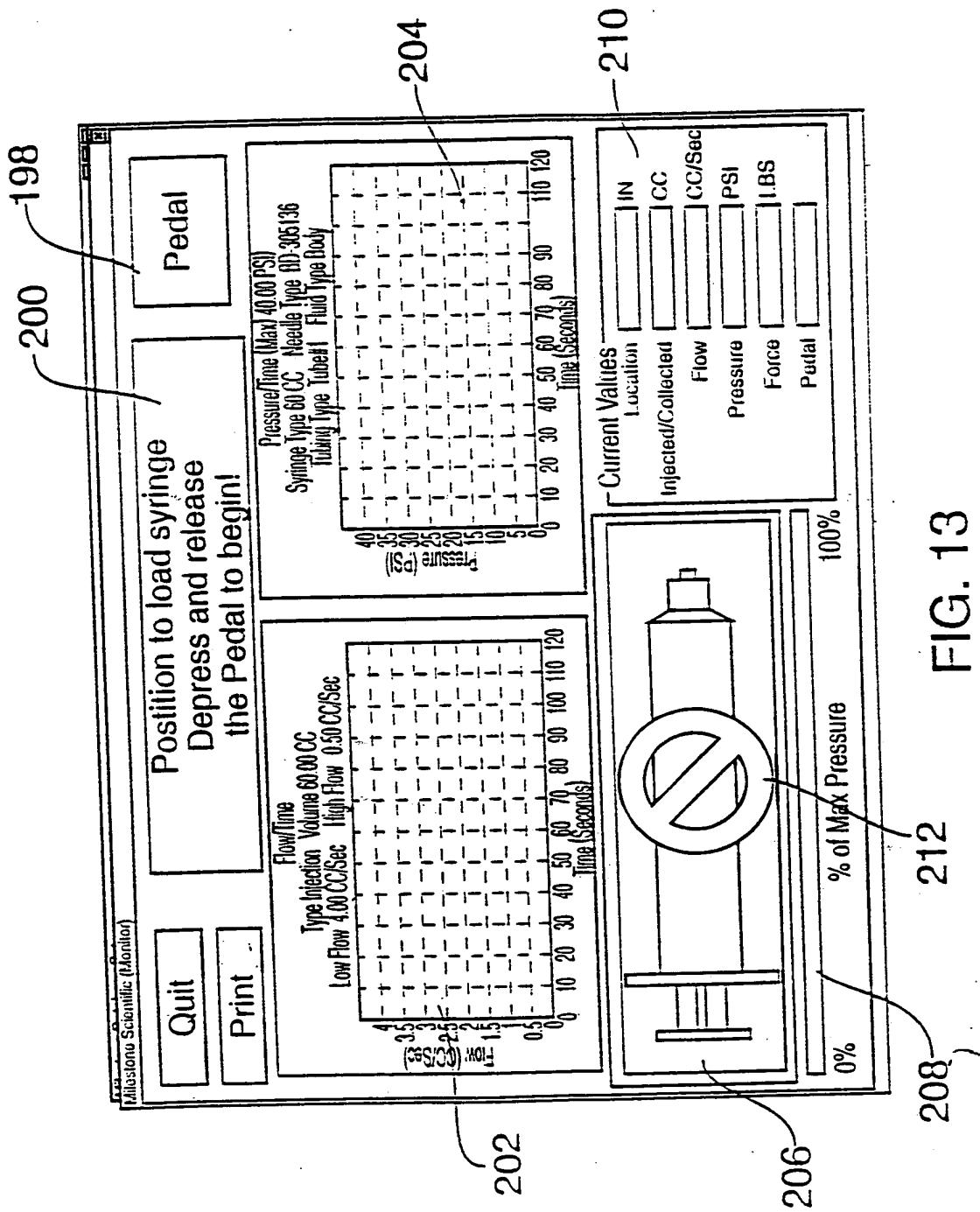
Machine Profile Setup Screen
Set Values for Components of Delivery System
Setup Variable for Machine

FIG. 12A

Milestone Scientific (Profile Setup)																																					
File	Edit																																				
Search	Run																																				
<input type="button" value="New"/> <input type="button" value="Open"/> <input type="button" value="Save"/> <input type="button" value="Print"/> <input type="button" value="Help"/>																																					
Release 2.1 <input type="checkbox"/>																																					
VOLUME General Test Profile Name <input type="text" value="Test#1"/> <input checked="" type="checkbox"/> Last Date Modified <input type="text" value="10/6/98"/> <input type="checkbox"/> Last Time Modified <input type="text" value="9:07:35AM"/> <input type="checkbox"/>																																					
Values <table border="1"> <tr> <td>Control</td> <td>Type</td> <td><input type="checkbox"/> Test/ul</td> </tr> <tr> <td></td> <td>Injection</td> <td><input checked="" type="checkbox"/> 1</td> </tr> <tr> <td></td> <td>Low Flow</td> <td><input type="text" value="4"/> CC/Sec</td> </tr> <tr> <td></td> <td>High Flow</td> <td><input type="text" value="0.5"/> CC/Sec</td> </tr> <tr> <td></td> <td>Pressure Limit</td> <td><input type="text" value="40"/> PSI</td> </tr> <tr> <td>Additional</td> <td>Charge Flow</td> <td><input type="text" value="0.5"/> CC/Sec</td> </tr> <tr> <td></td> <td>Indicator</td> <td><input type="text" value="1"/> CC</td> </tr> <tr> <td></td> <td>Aspirate</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>Volume</td> <td><input type="text" value="0.001"/> CC</td> </tr> <tr> <td></td> <td>Flow</td> <td><input type="text" value="0.001"/> CC/Sec</td> </tr> <tr> <td></td> <td>Dwell</td> <td><input type="text" value="2"/> Sec</td> </tr> <tr> <td></td> <td>Purge</td> <td><input type="checkbox"/></td> </tr> </table>		Control	Type	<input type="checkbox"/> Test/ul		Injection	<input checked="" type="checkbox"/> 1		Low Flow	<input type="text" value="4"/> CC/Sec		High Flow	<input type="text" value="0.5"/> CC/Sec		Pressure Limit	<input type="text" value="40"/> PSI	Additional	Charge Flow	<input type="text" value="0.5"/> CC/Sec		Indicator	<input type="text" value="1"/> CC		Aspirate	<input type="checkbox"/>		Volume	<input type="text" value="0.001"/> CC		Flow	<input type="text" value="0.001"/> CC/Sec		Dwell	<input type="text" value="2"/> Sec		Purge	<input type="checkbox"/>
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	Purge	<input type="checkbox"/>																																			
System Sizes <table border="1"> <tr> <td>Syringe</td> <td>Normal Volume <input type="text" value="60"/> CC</td> </tr> <tr> <td></td> <td>Stroke Length <input type="text" value="4.25"/> in.</td> </tr> <tr> <td></td> <td>Syringe Force <input type="text" value="2.75"/> in.</td> </tr> <tr> <td></td> <td>Full Pull <input type="text" value="0.2"/> in.</td> </tr> <tr> <td>Needle</td> <td>BD305136 <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>Gauge <input type="text" value="27"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>Length <input type="text" value="1.25"/> in.</td> </tr> <tr> <td></td> <td>Diameter <input type="text" value="0.02"/> in.</td> </tr> <tr> <td>Tube</td> <td>Tube#1 <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>Gauge <input type="text" value="27"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>Length <input type="text" value="54"/> in.</td> </tr> <tr> <td></td> <td>Diameter <input type="text" value="0.016"/> in.</td> </tr> <tr> <td>Fluid</td> <td>Body <input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td>Viscosity <input type="text" value="0.0001"/> slugs/cubic inch</td> </tr> <tr> <td></td> <td>Specific Weight <input type="text" value="0.0002"/> slugs/cubic inch</td> </tr> </table>		Syringe	Normal Volume <input type="text" value="60"/> CC		Stroke Length <input type="text" value="4.25"/> in.		Syringe Force <input type="text" value="2.75"/> in.		Full Pull <input type="text" value="0.2"/> in.	Needle	BD305136 <input checked="" type="checkbox"/>		Gauge <input type="text" value="27"/> <input checked="" type="checkbox"/>		Length <input type="text" value="1.25"/> in.		Diameter <input type="text" value="0.02"/> in.	Tube	Tube#1 <input checked="" type="checkbox"/>		Gauge <input type="text" value="27"/> <input checked="" type="checkbox"/>		Length <input type="text" value="54"/> in.		Diameter <input type="text" value="0.016"/> in.	Fluid	Body <input checked="" type="checkbox"/>		Viscosity <input type="text" value="0.0001"/> slugs/cubic inch		Specific Weight <input type="text" value="0.0002"/> slugs/cubic inch						
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Calculations <table border="1"> <tr> <td>Needle Volume</td> <td><input type="text" value="0.0001"/> CC</td> </tr> <tr> <td>Tube Volume</td> <td><input type="text" value="0.00025"/> CC</td> </tr> <tr> <td>System Volume</td> <td><input type="text" value="0.0003"/> CC</td> </tr> <tr> <td>Volume/Stroke (0.00025 in.)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Max Pressure (Low Flow)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Max Pressure (High Flow)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Max Flow</td> <td><input type="checkbox"/></td> </tr> </table>		Needle Volume	<input type="text" value="0.0001"/> CC	Tube Volume	<input type="text" value="0.00025"/> CC	System Volume	<input type="text" value="0.0003"/> CC	Volume/Stroke (0.00025 in.)	<input type="checkbox"/>	Max Pressure (Low Flow)	<input type="checkbox"/>	Max Pressure (High Flow)	<input type="checkbox"/>	Max Flow	<input type="checkbox"/>																						
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Max Pressure (High Flow)	<input type="checkbox"/>																																				
Max Flow	<input type="checkbox"/>																																				
Physiologic Source <input type="checkbox"/> <input type="text" value="Electrocardiogram"/>																																					

FIG. 12B

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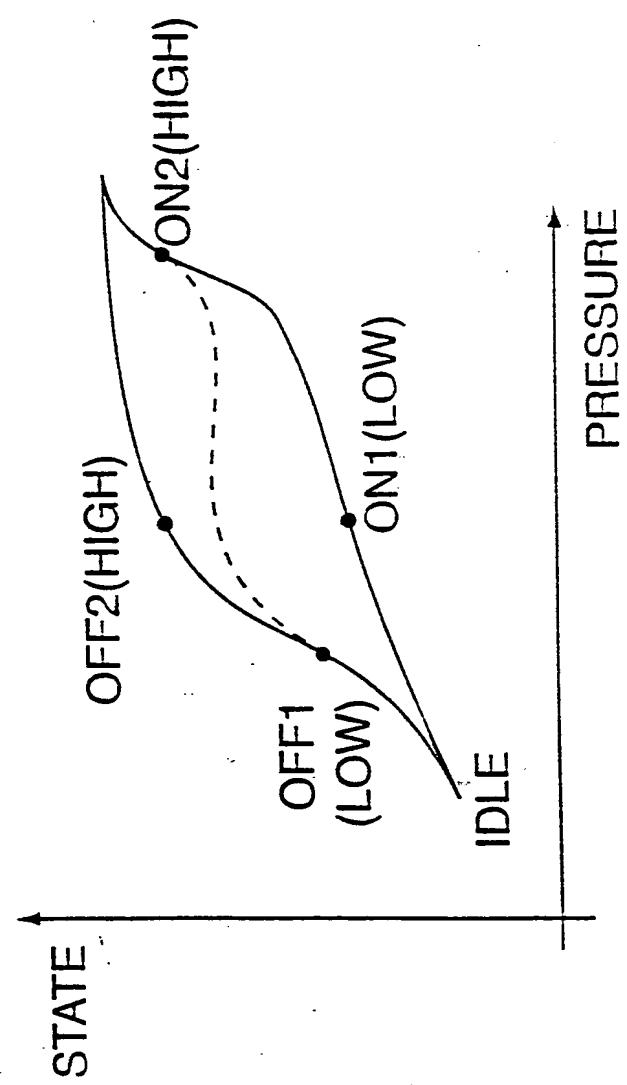


FIG. 14.

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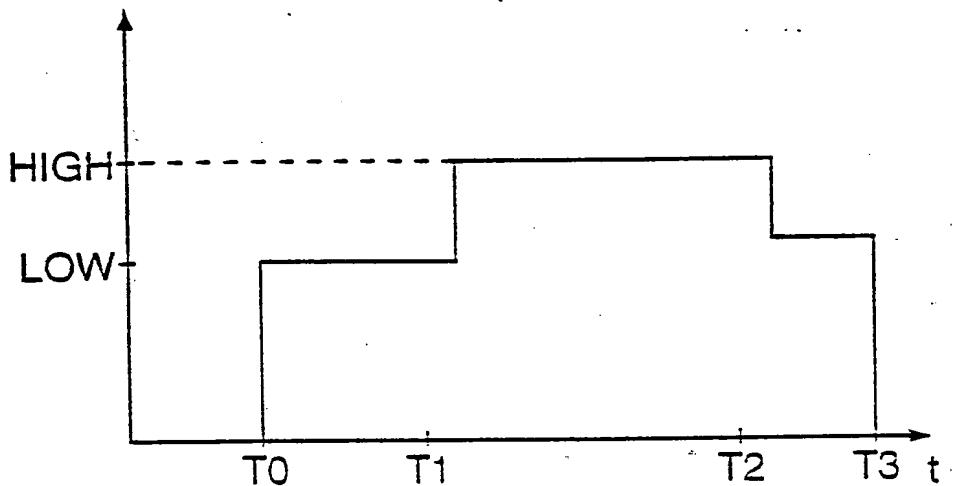


FIG. 15A

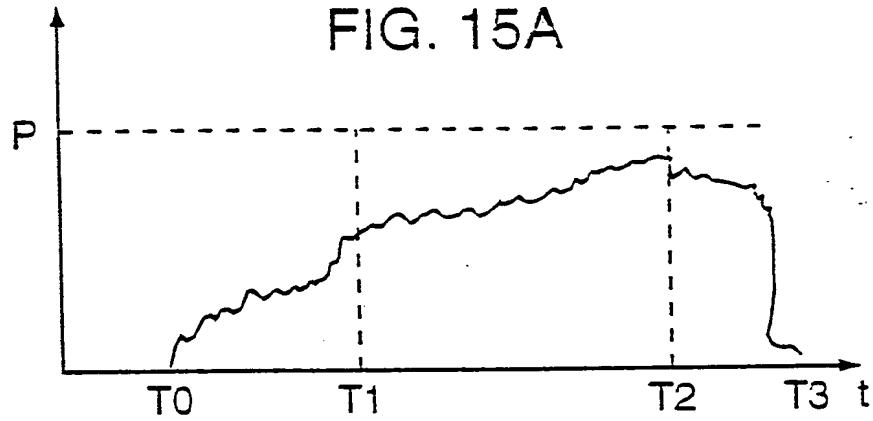


FIG. 15B

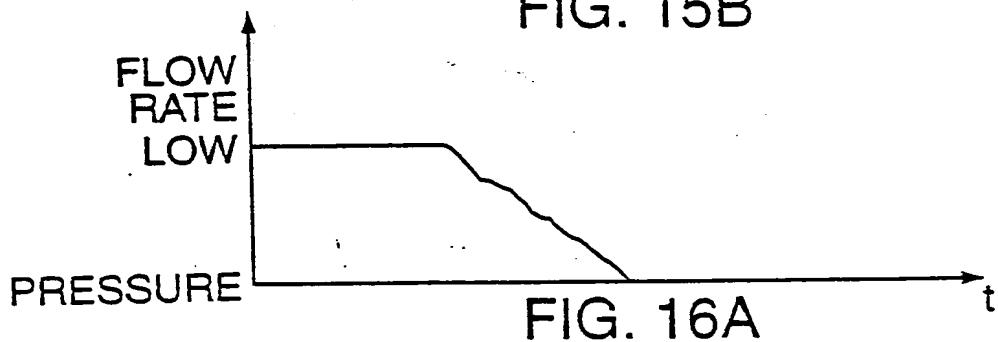


FIG. 16A

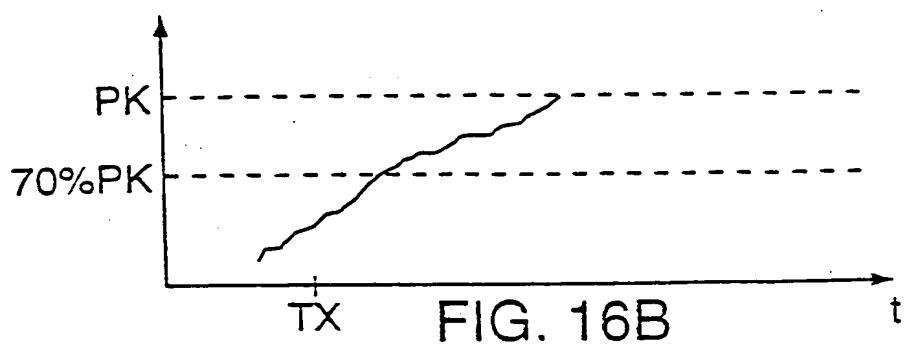


FIG. 16B

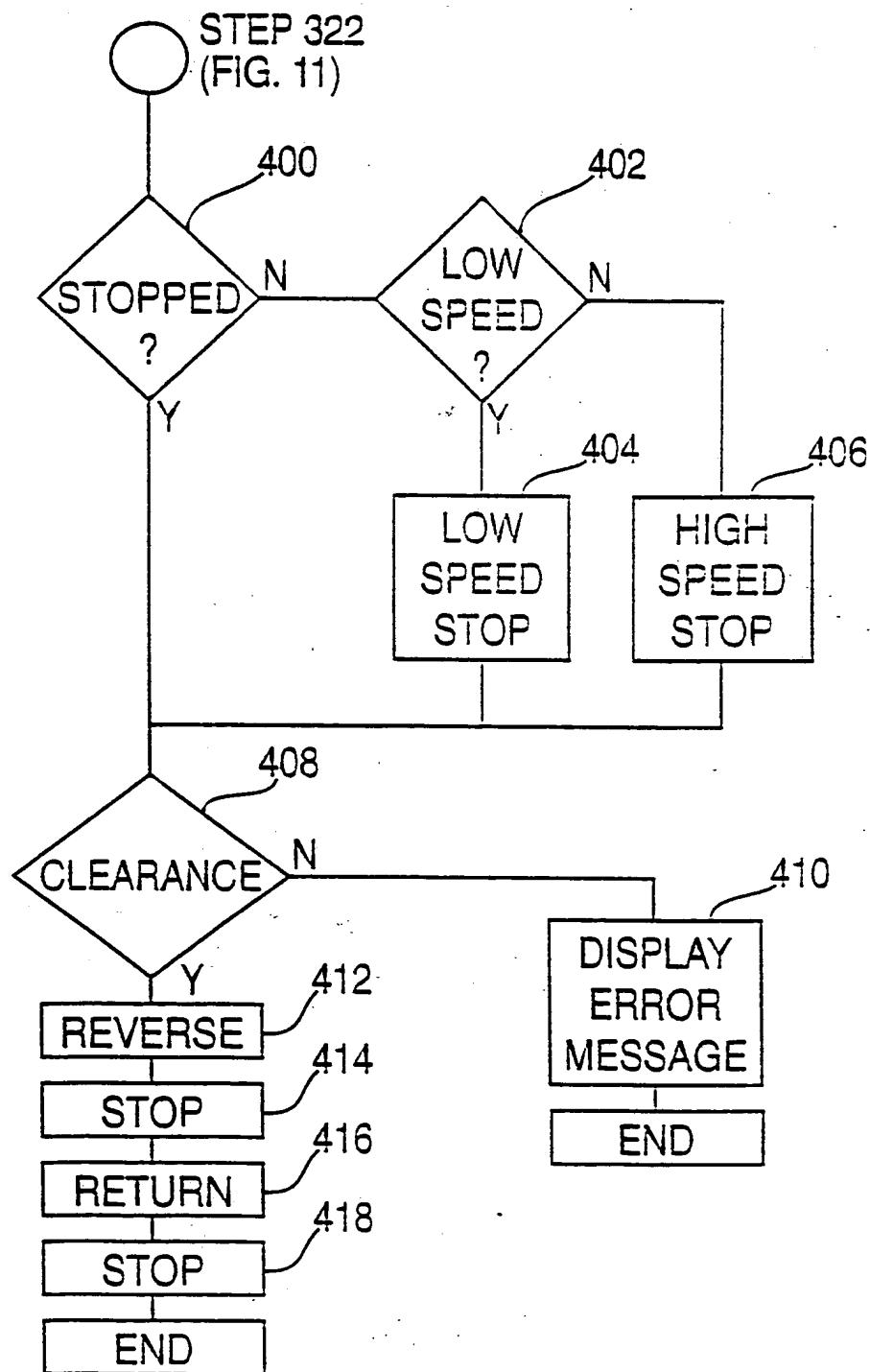


FIG. 17

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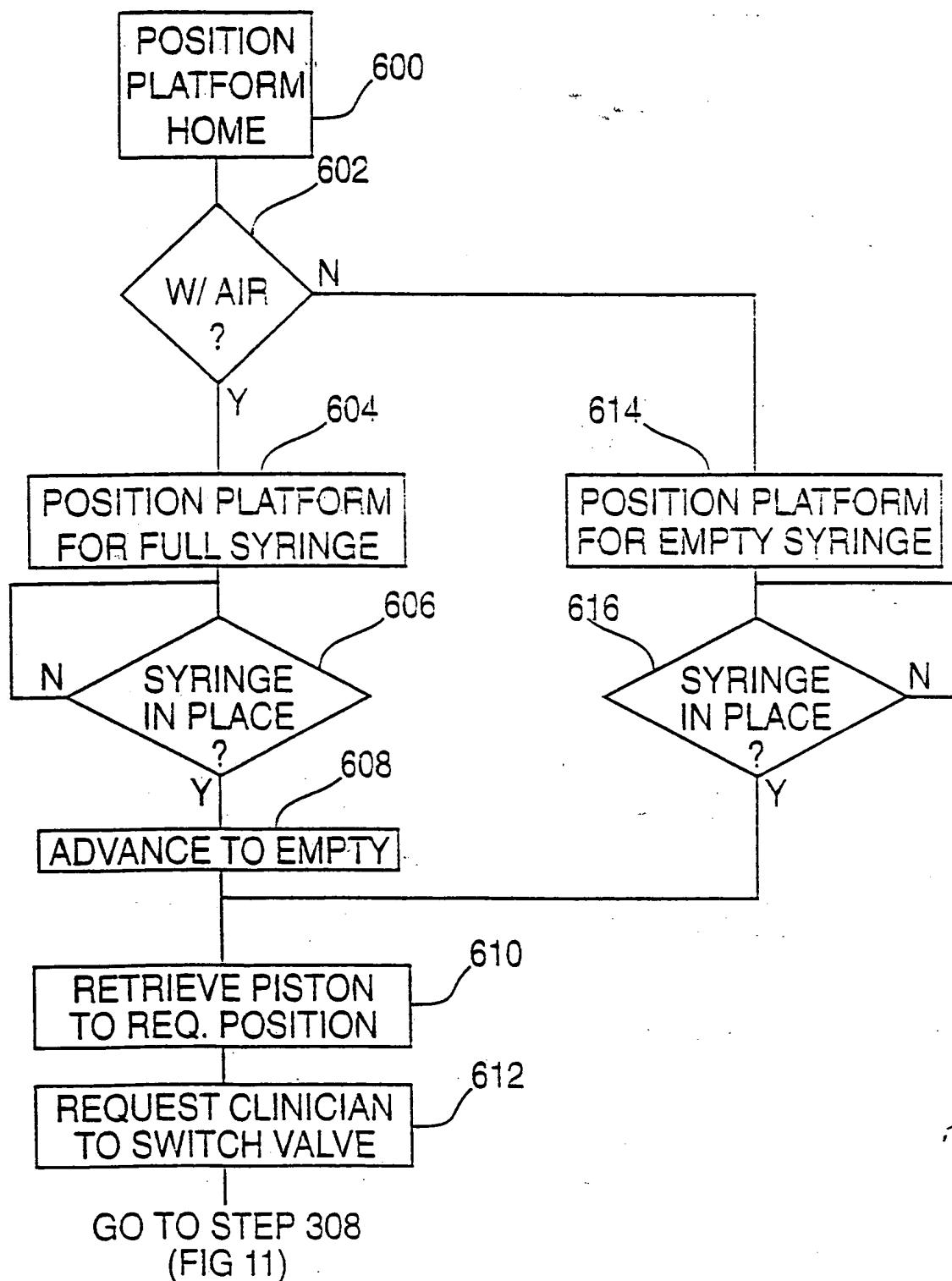


FIG. 18

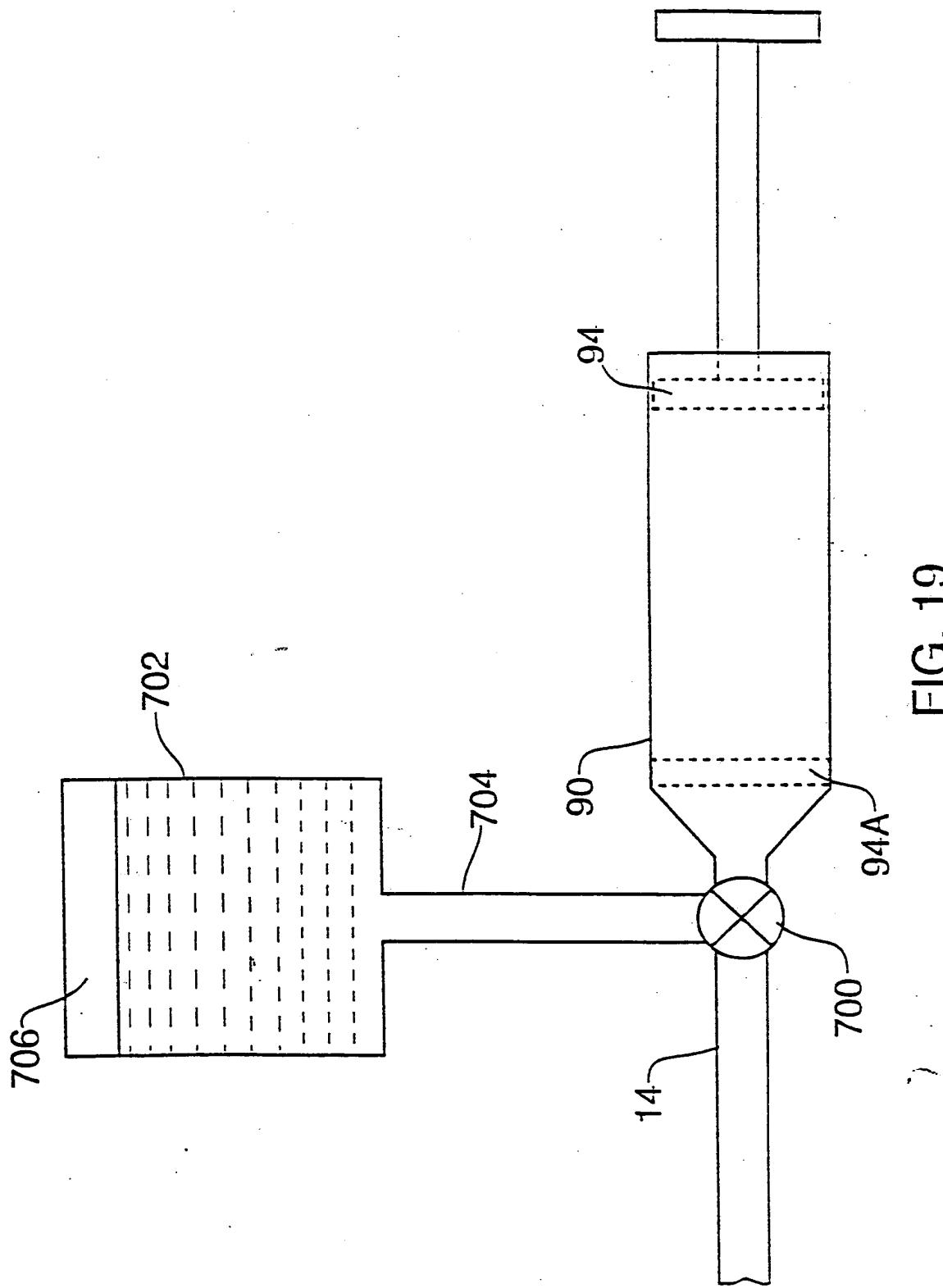


FIG. 19